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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	D5216
	<b>First Named Inventor</b>	Joseph R. Ward
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR MANUFACTURE OF GRAY CAST IRON FOR CRANKCASES AND CYLINDER HEADS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label  OR ☐ Correspondence address below

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Address													
International Engine Intellectual Property Company, L.L.C.													
Address													
4201 Winfield Rd.													
City			Warrenville			State		IL	ZIP		60555		
Country			U.S.A.			Telephone			630/753-2311			Fax	630/753-3982

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name			Joseph R.			Family Name or Surname			Ward				
(first and middle [if any])													
Inventor's Signature			<i>Joseph R. Ward</i>			Date			17 Dec 01				
Residence: City			New Palestine			State		IN	Country		USA	Citizenship	United States
Mailing Address			4445 S. Anton Way										

Mailing Address														
City			New Palestine			State		IN	ZIP		46163	Country		U.S.A.

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name						Family Name or Surname								
(first and middle [if any])														
Inventor's Signature						Date								
Residence: City						State			Country			Citizenship		
Mailing Address														
Mailing Address														
City						State			ZIP			Country		

☐ Additional inventors are being named on the \_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Joseph R. Ward
Group Art Unit	
Examiner Name	
Attorney Docket Number	D5216

I hereby appoint:

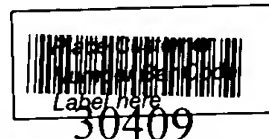
☒ Practitioners at Customer Number

30409

OR

☐ Practitioner(s) named below:

Name	Registration Number
Dennis Kelly Sullivan	26,510
Jeffrey P. Calfa	37,105
Neil Powell	45,202
Gilberto Hernandez	46,483



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

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P.O. Box 1488

Address

4201 Winfield Rd.

City

Warrenville

State

IL

Zip

60555

Country

U.S.A.

Telephone

630/753-2311

Fax

630/753-3982

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name

Joseph R. Ward

Signature

*Joseph R. Ward*  
17 Dec 01

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.

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